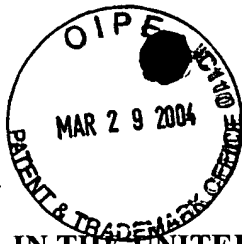


ITENTR.001A



#71B
4/6/04
PATENT T.M.

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant : Standard, et al.
Appl. No. : 10/090,505
Filed : February 26, 2002
For : INTEGRATED, ADAPTABLE
THEATER, CLUB AND
MULTIPLEX
Examiner : N. Slack
Group Art Unit : 3635

CERTIFICATE OF MAILING

I hereby certify that this correspondence and all marked attachments are being deposited with the United States Postal Service as first-class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on

March 24, 2004

(Date)

David N. Weiss, Reg. No. 41,371

RESPONSE TO SEPTEMBER 24, 2003 OFFICE ACTION

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

RECEIVED

APR 05 2004

GROUP 3600

Dear Sir:

In response to the Office Action mailed on September 24, 2003, please amend the above-identified application as follows.

Introductory Comments

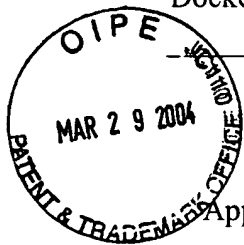
Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Amendments to the Drawings begin on page 5 of this paper. A "Replacement Sheet" for each sheet of drawings being amended can be found in the Appendix, which begins at page 15 of this paper.

Remarks/Arguments begin on page 6 of this paper.

41
Docket No.: ITENTR.001A

3635 \$
Customer No.: 20,995 #7/B
4/6/04
J.M.



AMENDMENT / RESPONSE TRANSMITTAL

Applicant : Standard, et al.
App. No. : 10/090,505
Filed : February 26, 2002
For : INTEGRATED, ADAPTABLE
THEATER, CLUB AND
MULTIPLEX
Examiner : N. Slack
Art Unit : 3635

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March 24, 2004

(Date)

David Weiss

David N. Weiss, Reg. No. 41,371

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

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APR 05 2004
GROUP 3600

Transmitted herewith for filing in the above-identified application are the following enclosures:

- (X) Response to September 24, 2003 Office Action in 15 pages.
- (X) Replacement Figures 1 and 3.
- (X) The present application qualifies for small entity status under 37 C.F.R. § 1.27.

The fee has been calculated as shown below:

FEE CALCULATION				
FEE TYPE		FEE CODE	CALCULATION	TOTAL
Total Claims	23 - 30 = 0	2202 (\$9)	0 x 9 =	\$0
Independent Claims	2 - 3 = 0	2201 (\$43)	0 x 43 =	\$0
3 Month Extension		2253 (\$475)		\$475
			TOTAL FEE DUE	\$475

- (X) An extension of time is hereby requested by payment of the appropriate fee indicated above.
- (X) A check in the amount of \$475 is enclosed.
- (X) Return prepaid postcard.

03/30/2004 FFRNREIA 00000006 10090505

01 FC:2253

475.00 0P

Docket No.: ITENTR.001A

Customer No.: 20,995

- (X) Please charge any additional fees, including any fees for additional extension of time, or credit overpayment to Deposit Account No. 11-1410.



David N. Weiss
Registration No. 41,371
Attorney of Record
Customer No. 20,995
(310) 551-3450

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